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LMMY/MMY/kcs  
08/8/03

PATENT APPLICATION  
DOCKET NO. 2825.1021-003

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Thomas J. Hudson, James C. Engert and Andrea Richter  
Application No.: 09/693,205 Group: 1653  
Filed: October 20, 2000 Examiner: C. Kam  
Confirmation No.: 7268  
For: IDENTIFICATION OF ARSACS MUTATIONS AND METHODS  
OF USE THEREFOR

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the  
United States Postal Service with sufficient postage as First Class Mail in  
an envelope addressed to Commissioner for Patents, P.O. Box 1450,  
Alexandria, VA 22313-1450

on 7/8/03 Wendy Morrissey  
Date Signature  
Wendy Morrissey  
Typed or printed name of person signing certificate

TECH CENTER 1600/2900

JUL 16 2003

RECEIVED

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

[ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)	(COL. 2)	(COL. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDT. FEE
TOTAL	8	MINUS	X \$ 9	\$
<b>INDEP</b> 4 MINUS ** 16 0				
<b>FIRST PRESENTATION OF MULTIPLE DEP. CLAIM</b>				
X	\$18	\$		
X	\$84	\$		
+	\$280	\$		

\* not fewer than 20

\*\* not fewer than 3

TOTAL = \$ 0

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [        ] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
		\$ _____
		TOTAL: \$ <u>      0      </u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for one month Extension of Time	\$ <u>      110      </u>
<input type="checkbox"/>	Amendment Fee	\$ _____
<input checked="" type="checkbox"/>	Other Fees:	\$ _____
	Request for Continued Examination	\$ <u>      750      </u>
		\$ _____
		\$ _____
		TOTAL: \$ <u>      860      </u>

A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Lisa M. Treannie  
Lisa M. Treannie  
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Dated: 7/8/03